

FEC FORM 3LRECEIVED
SECRETARY OF THE SENATE
PUBLIC RECORDS**REPORT OF CONTRIBUTIONS BUNDLED BY LOBBYISTS/REGISTRANTS
AND LOBBYIST/REGISTRANT PACs**

12 OCT 15 PM 12:15

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. **12FE4M5**

Friends of Sherrod Brown

ADDRESS (number and street) **PO Box 76187**

Check if different
than previously
reported. (ACC)

Washington

CITY

DC

STATE

20013

ZIP CODE

2. FEC IDENTIFICATION NUMBER

C00264697

3. IS THIS REPORT ☒ NEW (N) OR ☐ AMENDED (A)

4. STATE DISTRICT

OH**00**

For Candidates Only

5. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)
and/or Semi-annual Report☒ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)
and/or Semi-annual Report☐ July 31 Mid-Year
Report (Non-election
Year - PAC/Party) (MY)
and/or Semi-annual Report

(b) Monthly Report Due On: ☐ Feb 20 (M2) ☐ May 20 (M5) ☐ Aug 20 (M8) ☐ Nov 20 (M11)
(Non-Election Year Only)
☐ Mar 20 (M3) ☐ Jun 20 (M6) ☐ Sep 20 (M9) ☐ Dec 20 (M12)
(Non-Election Year Only)
☐ Apr 20 (M4) ☐ Jul 20 (M7) and/or ☐ Oct 20 (M10) ☐ Jan 31 (YE) and/or
Semi-annual Report

(c) 12-Day PRE-Election Report for the: ☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R)
☐ Special (12S) ☐ Convention (12C) This report also covers the semi-annual period
Election on ☐ / ☐ / ☐ in the State of ☐ See Line 6(b)

(d) 30-Day POST-Election Report for the: ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S) This report also covers the semi-annual period
Election on ☐ / ☐ / ☐ in the State of ☐ See Line 6(b)

6. Covered Period(s) (a) Quarterly/Monthly/Pre-/Post-Election Covered Period (b) Semi-annual Covered Period

This report covers ☐ 07 ☐ 01 ☐ 2012 through ☐ 09 ☐ 30 ☐ 2012 and/or January 1 - June 30
July 1 - December 31

7. Total Reportable Bundled Contributions by Lobbyists/Registrants or Lobbyist/Registrant PACs (a) Quarterly/Monthly/Pre-/Post-Election Covered Period (b) Semi-annual Covered Period

107793.40

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer **Judith G. Zamore**

Signature of Treasurer

Judith G. Zamore

Date

10 / 15 / 2012

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

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